

HAWAII STATE ETHICS COMMISSION

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THIS SPACE FOR OFFICE USE ONLY

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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

	(Type or Fink			
PART I LOBBYIST				
NAME(Last)	(First)	(Middle)	TELEPHONE	
MORRIS	GEORGE "RED"	Α.	808-531-4551	
MAILING ADDRESS (Street)			FAX	
222 SOUTH VINEYARD STREET, S	808-533-4601			
(City)	(State)	(Zip	(Zip Code)	
HONOLULU	HAWAII	96813-	96813-2453	
EMPLOYING ORGANIZATION (Fill in	TELEPHONE			
G.A. MORRIS, INC.			808-531-4551	
MAILING ADDRESS (Street)			FAX	
222 SOUTH VINEYARD STREET, S	808/533-4601			
(City)	(State)	(Zip	Code)	
HONOLULU	HAWAII	9681	3-2453	

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU	TELEPHONE 808-923-0407		
HAWAII HOTEL & LODGING ASS	OCIATION		
MAILING ADDRESS (Street)	FAX 808-924-3843		
2270 KALAKAUA AVENUE, SUITE	E 1506	-	
(City)	(State)	(Zip Code)	
HONOLULU	HI	96815	
NAME OF PERSON RESPONSIBLE F MURRAY TOWILL	OR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT	TELEPHONE 808-923-0407	
MAILING ADDRESS (Street)		FAX 808-924-3843	
2270 KALAKAUA AVENUE, SUITE	E 1506		

-	,							
(City)		(State) (Zip		Code)				
HONOLULU		HI	9681	96815				
DAD	OT III DESCRIPTION	OF SUBJECTS LIBON WHICH	LVOU EVECT TO LOPPY					
PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY								
[]	Agriculture	[] Education	[] Human Services	[] Science, Technology & Economic Development				
[]	Communications & Public Utilities	[] Government Operations & Finance	[] Intergovernmental Relations, International Affairs	[X] Tourism & Recreation				
[]	Consumer Protection & Commerce	[] Hawaiian Affairs	[] Labor & Employment	[] Transportation				
[]	Culture, Arts, Historic Preservation	[] Health	[] Planning, Land & Water Use Management	[] Other: (indicate below)				
[]	Ecology, Energy Environmental Protection		[] Public Safety & Corrections					
PAR		ON OF LOBBYIST						
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.								
		(Signature of Lobbyist)		(Date)				
PAR		ON TO LOBBY						
NAM	<u> </u>		TITLE OF AUTHORIZING OFFICE	R OR PERSON REPRESENTED				
MURRAY TOWILL PRESIDENT								
NAME OF ORGANIZATION (if applicable)				LEPHONE 808-923-0407				
HAW	AII HOTEL & LODGING AS	SOCIATION						
MAILING ADDRESS (Street)			FA	X 808-924-3843				
2270	KALAKAUA AVENUE, SUIT	TE 1506						
	(City)	City) (State)		(Zip Code)				
HONOLULU HI			96815					
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.								
0	Mung"	Towns		1/12/07				
	Signa	ture of Authorizing Officer or Person F	Represented)	(Date)				